## 15051082865

FEC FORM 1

## STATEMENT OF ORGANIZATION

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2013 JUL -9 PM 2: 05

FEDDRENGE AND CENTER

COMMITTEE (in full)	is chan	il name ged)		ole:If typing, type ne lines.	12FE4N	15	
WORKING BL	VE DEM	OCRA	111 <u>0</u>	CLUB	<u> </u>		
ADDRESS (number and street)	1866 C	AMAR	112	0 5.P.R.)1	V16.5: R	D. <b>*</b> G.	
(Check if address is changed)			1	1:1:11	<u> </u>	100010	<u></u>
	CAMAR				CA	9.3012	-
COMMITTEE'S E-MAIL ADDRE	SS (Please provide		CITY -mail addre	988)	STATE		CODE
(Check if address is changed)	SCRICU	-		esearc			<u> </u>
COMMITTEE'S WEB PAGE AD	DRESS (URL)						
(Check if address is changed)			<u> </u>				
2. DATE 67 0	1 2013	<u>3</u> `					
3 FEC IDENTIFICATION N	UMBER		046	50717			
4. IS THIS STATEMENT	NEW (N)	OR	X	AMENDED (A)			
l certily that I have examined th	nis Statement and	to the best	of my kno	owledge and belief	il is true, corre	ect and complete.	
Type or Print Name of Treasure			W.	59	EVE CU	MMINGS	
Signature of Treasure					Date 0	7 01	2013
NOTE: Submission of false, errone				et the person signing O BE REPORTED V			2 U.S.C. §437g.
Office Use Only			Fe To	or further Information deral Election Commiss Il Free 800-424-9530 cal 202-694-1100		FEC FC	

5.

	COMMITTEE e Committee:
(a) \	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below)
Name of Candidate	
Candidate Party Affiliat	
(c)	District  This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Con	nmittee:
(d)	(National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fond. (Identify connected organization on line 6.) Its connected organization is a:
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Cooperative
	In addition, this committee is a Lobbyist/Flagistraot PAC.
(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fund	draising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses let proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a foreign andidate.
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Corr	nmittees Participating in Joint Fundraiser
1.	FEC ID oumber: C
2.	
3.	FEC ID number C
4.	FEC ID number C

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Write or Type Committee N	ame	
6. Name of Any Connecto	ed Organization, Affiliated Committee, Joint Fundraising Repre	sentative, or Leadership PAC Sponsor
	<u> </u>	
Mailing Address		
	CITY	STATE ZIP CODE
Relationship: Conne	octed Organization Affiliated Committee Joint Fundraising F	Representative Leadership PAC Sponso
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position	n of the person in possession of committee
Full Name		<u> </u>
Mailing Address		<u> </u>
		<u> </u>
Title or Position	СІТУ	STATE ZIP CODE
L.i. in a shake Sadan	Telephone numb	per Lii-Lii
3 Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the og., assistant treasurer).	committee, and the name and address of
Full Name of Treasurer		<del>                                      </del>
Mailing Address		<u></u>
		<u> </u>
Fitle or Position	CITY	STATE ZIP CODE
la de la	Telephone numb	er         -         -
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720 7011	III I (I TANSEU O Z IZSOVA)	rage 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE ZIP	CODE
Title or Position	Telephone number	
safety deposit be	r <b>Depositories</b> : List all banks or other depositories in which the committee deposits funds, holds ac oxes or maintains funds. Depository, etc.	counts, rents
safety deposit be Name of Bank,	oxes or maintains funds.  Depository, etc.    R:A:Bo:B:A:N:K: N:A:::::::::::::::::::::::::::::	counts, rents
salety deposit be Name of Bank, I	oxes or maintains funds.  Depository, etc.  RABOBANK VA	counts, rents
safety deposit be Name of Bank,	oxes or maintains funds.  Depository, etc.  IRABOBANK VA  BOOLS, MILLLS, RD	
safety deposit be Name of Bank,	oxes or maintains funds.  Depository, etc.    R:A:Bo:B:A:N:K: N:A:::::::::::::::::::::::::::::	
salety deposit be Name of Bank, I Mailing Address	Oxes or maintains funds.  Depository, etc.  RABOBANK NA  BABIS, MILLUS, RD  VIE.N.T.U.R.A  CITY STATE ZIF	
salely deposit be Name of Bank, I Mailing Address	Oxes or maintains funds.  Depository, etc.  RABOBANK NA  BABIS, MILLUS, RD  VIE.N.T.U.R.A  CITY STATE ZIF	31-LLL
salely deposit be Name of Bank, I Mailing Address	Oxes or maintains funds.  Depository, etc.  RABOBANK NA  BABIS, MILLUS, RD  VIE.N.T.U.R.A  CITY STATE ZIF	31-LLL
salely deposit be Name of Bank, if Mailing Address Name of Bank, if	Oxes or maintains funds.  Depository, etc.  IRABOBANK VA  IVENTIURA  CITY STATE ZIF	31-LLL
salely deposit be Name of Bank, if Mailing Address Name of Bank, if	Oxes or maintains funds.  Depository, etc.  IRABOBANK VA  IVENTIURA  CITY STATE ZIF	31-L1-L1
safety deposit be	Oxes or maintains funds.  Depository, etc.  IRABOBANK VA  IVENTIURA  CITY STATE ZIF	31-L1-L1

(3/2005)

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